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DEPARTMENT OF CORRECTION	RELATED NCCHC/ACA STANDARDS:		
	P-E-08/4-4351 (ESSENTIAL)		
CHAPTER: 11 HEALTH SERVICES	SUBJECT: EMERGENCY SERVICES		
APPROVED BY THE COMMISSIONER:			
EFFECTIVE DATE: 11-19-07			

## **PURPOSE:**

There is a written plan to provide 24-hour emergency medical, mental health and dental care to inmates.

## **DEFINITION:**

Emergency care: Care for an acute illness or an unexpected health need that cannot be deferred until the next scheduled sick call or clinic.

## **POLICY:**

- 1. Twenty-four (24) hour emergency medical, mental health and dental care will be available to inmates.
- 2. Agreements will be made with local Emergency Rooms to provide emergency off-site care for inmates.
- 3. Names, addresses and telephone numbers of pertinent individuals, the Poison Control and the Emergency Medical Services to be used will be readily accessible in Health Services Unit.
- 4. Local Emergency Medical Services or other ambulance services will provide emergency vehicles.
- 5. A physician will be available for consultation 24 hours per day, 7 days per week.
- 6. "On-call" schedules will be developed and the pager or telephone numbers will be listed on the schedule and posted in the Health Services Unit.
- 7. Correctional and healthcare staff will be trained in proper emergency transfer procedures in order to facilitate the immediate transfer of inmates.

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- 8. Correctional staff will be immediately notified when emergency transfer is anticipated to arrange security escort.
- 9. Healthcare staff will provide first aid in area or have inmate moved to the Health Services Unit for assessment and treatment.
- 10. Healthcare staff will contact physician with report and receive orders, if indicated.
- 11. Orders from the physician will be initiated and inmate assessment and orders will be documented in the inmate's Medical Record.
- 12. If assessment indicates a life-threatening condition, life-support measures (CPR) will be initiated and security requested to call access number for local Emergency Medical Services (e.g., 911) immediately.
  - a. If needed, the correctional staff will be requested to assist in performing CPR.
  - b. CPR support of inmate will be continued until relieved by paramedics.
- 13. Emergency Department Transfer will be completed to include pertinent medical information. Transporting officers will be reminded of the need to have the inmate and Referral form returned to the Health Services Unit upon return to the institution. The information provided to and returned from the offsite emergency room will be sealed in an envelope.
- 14. As soon as practical after inmate leaves for Emergency Department, healthcare staff will telephone Emergency Department to give report on inmate status.
- 15. Medical Director will be notified of transfer of the inmate if prior approval was not possible due to urgency of medical need.
- 16. Health Services Administrator, or designee, will be notified of transfer to the Emergency Room.
- 17. Healthcare staff, in order to obtain report on inmate's status prior to shift change, will contact Emergency Department.
- 18. When inmate returns from Emergency Room to designated area to be reviewed by the nurse:

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- a. Emergency Department orders and report will be obtained from correctional staff.
- b. Report will be reviewed for pertinent orders or recommendations.
- c. Medical Director will be contacted prior to implementation of Emergency Department recommendations.
- d. Inmate will be assessed. Findings will be documented in Medical Record.
- e. The inmate will be scheduled for next physician clinic.
- f. Information will be provided to Medical Director for chart review and documentation in medical record progress notes.
- 19. If inmate is admitted to the hospital, disposition will be noted on a copy of the Emergency Referral form, and admission noted on the Hospital Admission Log. Medical Director will be notified of disposition. Utilization Management will be notified of hospitalization.
- 20. Emergency equipment and supplies will be readily accessible and checked on a daily basis

## References:

National Commission on Correctional Health Care: Standards for Health Services in Prisons, 2003, P-E-08

American Correctional Association: Standards for Correctional Institutions, 4th Edition, 2003. 4-4351